

R. E. DUNCAN AND COMPANY

CERTIFIED PUBLIC ACCOUNTANT

2826 Philadelphia Drive

Dayton, OH 45405-1911

(937) 275-3992 Fax (937) 275-3772

Member of Ohio Society of Certified Public Accountants - American Institute of Certified Public Accountants - National Society of Tax Professionals

Client Name: _____

Dear Client:

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your 2017 federal, state and local income tax returns from information which you will furnish to us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information. We will furnish you with questionnaires and worksheets to guide you in gathering the necessary information. Your use of such forms will assist in keeping the fee to a minimum.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations and/or irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the income tax returns.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, please inform us by noting so at the end of the return copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,

R.E. Duncan & Company, CPA

Accepted By: _____
Client Signature

Date

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Name: _____ Date of Birth _____ SSN _____

Spouse: _____ Date of Birth _____ SSN _____

Address: _____ City/State _____ Zip _____

Occupation (Taxpayer) _____ (Spouse) _____

Phone (Home) _____ Work _____ Cell Phone/Pager _____

Dependent _____ Relationship _____ Date of Birth _____ SSN _____

Dependent _____ Relationship _____ Date of Birth _____ SSN _____

Do you have any money or property in another country? _____ If so, please provide details

Do you own rental property or run your own business? _____ If so, please fill out applicable worksheets

Any other information we should know? _____

**DID YOU MAKE ANY PURCHASES IN 2017 THAT YOU DID NOT PAY SALES TAX ON (ie INTERNET) _____
IF SO, NEED AMOUNT _____. YOU MUST NOW CERTIFY TO OHIO THAT YOU DO NOT
OWE USE TAX**

Please make sure we have the following items, as applicable:

INCOME: W-2's, 1099-R, 1099-MISC, 1099-SSA, W-2G, 1099-INT, 1099-DIV, 1099-B, 1099-G, Unemployment Benefits, K-1's from Estates, Partnerships, and S-Corps,

DEDUCTIONS & CREDITS: 1098 (Mortgage Interest), Real Estate Taxes, Charity, Medical Expenses, 1098-T (Tuition Statement), Child Care Provider Information, IRA Contributions, HSA Withdrawals/Contributions, Receipts of College Expenses Paid

HEALTH CARE INFORMATION: 1095-A, Exemption Certificate Numbers, Premium Subsidy Payments

PLEASE LET US KNOW OF ANY NOTICES FROM TAXING AGENCIES

ALL CLIENTS MUST COMPLETE THE HEALTH COVERAGE WORKSHEET & DRIVERS LICENSE INFORMATION. YOUR TAXES CANNOT BE DONE WITHOUT THIS INFORMATION.

If you can claim the Earned Income Credit, please complete last page.

Direct Deposit: Yes or No If Yes: Bank Name _____ Checking or Savings (please circle)

Routing # _____ Acct # _____

NEW CLIENTS ONLY—WE NEED COPIES OF 2014, 2015 AND 2016 RETURNS

The IRS and Ohio have imposed mandatory electronic filing requirements. Your return will be filed electronically unless you tell us you want to file a paper return and sign an electronic filing waiver when you pick up your return. You can file electronically and still receive your refunds or pay your balance due by mail.

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The State of Ohio now requires Drivers License Information in order to electronically file. Please complete below OR have us make a copy of your Drivers License

Taxpayer Drivers License Information:

License Number: _____

Date Issued: _____

Dates Expires: _____

Issuing State: _____

Spouse Drivers License Information:

License Number: _____

Date Issued: _____

Dates Expires: _____

Issuing State: _____

Dependent Drivers License Information: (If we are preparing a tax return for them)

License Number: _____

Date Issued: _____

Dates Expires: _____

Issuing State: _____

Dependent Drivers License Information: (If we are preparing a tax return for them)

License Number: _____

Date Issued: _____

Dates Expires: _____

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Questions for Earned Income Credit, Child Tax Credit, and American Opportunity Tax Credit

If you are claiming any of the above Credits, the IRS has instituted additional documentation requirements for tax preparers. Please complete this form and return to us. Your tax return cannot be completed if this form is not completed.

1. How many months did the child live with you?
2. What is the child's relationship to you?
3. Can anyone else claim this child?
4. If the child claimed is not your son or daughter, please explain why the parents are not claiming the child.
5. To show that the child (or children) lived with you, we need at least one of the following documents for each child:
 - School record or statement showing child's name and address
 - Landlord statement that child lives with you
 - Healthcare provider statement showing child's name and address
 - Medical records showing child's name and address
 - Child care provider records showing child's name and address
 - Placement agency statement
 - Social services records or statements
 - Place of worship statement that the child lives with you
 - Employer statement showing child's name and address
6. Have you ever been denied the any Credits? Please bring in IRS Notice.
7. For the American Opportunity Tax Credit, we need the following information:
 - 1098-T from the college
 - A Statement from the college showing charges and payments made
 - Your records of any payments to the college (cancelled checks or credit card statements)
 - Is the student at least ½ time?
 - When did the student start college?

Taxpayer Signature _____ Print Name _____ Date _____

Taxpayer Signature _____ Print Name _____ Date _____